

**N.M.O.C.D. COPY UNITED STATES**  
**DEPARTMENT OF THE INTERIOR**  
**GEOLOGICAL SURVEY**

SUBMIT IN TRIPLICATE\*  
(Other instruction: reverse side)

Form approved.  
Budget Bureau No. 42-R1424.

**SUNDRY NOTICES AND REPORTS ON WELLS**

(Do not use this form for proposals to drill or to deepen or plug back to a different reservoir.  
Use "APPLICATION FOR PERMIT—" for such proposals.)

1. OIL WELL <input type="checkbox"/> GAS WELL <input checked="" type="checkbox"/> OTHER <input type="checkbox"/>	JUL 16 1981	
2. NAME OF OPERATOR Yates Petroleum Corporation	O. C. D.	
3. ADDRESS OF OPERATOR 207 South 4th Street, Artesia, NM 88210	ARTESIA, NM	
4. LOCATION OF WELL (Report location clearly and in accordance with any State requirements.* See also space 17 below.) At surface  660' FSL & 1980' FEL	5. LEASE DESIGNATION AND SERIAL NO. NM 1882	6. IF INDIAN, ALLOTTEE OR TRIBE NAME
	7. UNIT AGREEMENT NAME	8. FARM OR LEASE NAME Leeman OC Federal
	9. WELL NO. 1	10. FIELD AND POOL, OR WILDCAT wildcat 11.1
	11. SEC., T., R., M., OR BLK. AND SURVEY OR AREA Sec. 18-7-26	12. COUNTY OR PARISH Chaves
14. PERMIT NO.	15. ELEVATIONS (Show whether DF, RT, GR, etc.) 3630' GR	13. STATE NM

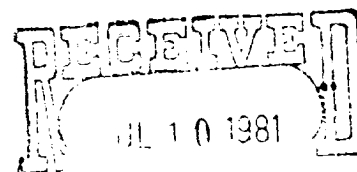
16. Check Appropriate Box To Indicate Nature of Notice, Report, or Other Data

NOTICE OF INTENTION TO:		SUBSEQUENT REPORT OF:	
TEST WATER SHUT-OFF <input type="checkbox"/>	PULL OR ALTER CASING <input checked="" type="checkbox"/>	WATER SHUT-OFF <input type="checkbox"/>	REPAIRING WELL <input type="checkbox"/>
FRACTURE TREAT <input type="checkbox"/>	MULTIPLE COMPLETE <input type="checkbox"/>	FRACTURE TREATMENT <input type="checkbox"/>	ALTERING CASING <input type="checkbox"/>
SHOOT OR ACIDIZE <input type="checkbox"/>	ABANDON* <input type="checkbox"/>	SHOOTING OR ACIDIZING <input type="checkbox"/>	ABANDONMENT* <input type="checkbox"/>
REPAIR WELL <input type="checkbox"/>	CHANGE PLANS <input type="checkbox"/>	(Other) <input type="checkbox"/>	

(NOTE: Report results of multiple completion on Well Completion or Re-completion Report and Log form.)

17. DESCRIBE PROPOSED OR COMPLETED OPERATIONS (Clearly state all pertinent details, and give pertinent dates, including estimated date of starting any proposed work. If well is directionally drilled, give subsurface locations and measured and true vertical depths for all markers and zones pertinent to this work.)\*

We propose to run 13 3/8" surface casing to a depth of 890' per request of New Mexico Oil Conservation Commission. We do not intend to circulate intermediate casing.



OIL & GAS  
U.S. GEOLOGICAL SURVEY  
ROSWELL, NEW MEXICO

Original Application submitted 6-17-81

18. I hereby certify that the foregoing is true and correct

SIGNED <i>[Signature]</i>	TITLE <u>Regulatory Manager</u>	DATE <u>7-8-81</u>
(This space for Federal or State office use)		
APPROVED BY <i>[Signature]</i> CONDITIONS OF PERMIT ANY:	TITLE	DATE
FOR <u>JAMES A. GILHAM</u> DISTRICT SUPERVISOR	*See Instructions on Reverse Side	